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By:

Nancy Costello Miller Deputy Attorney General Telephone (973) 648-4735

> STATE OF NEW JERSEY DEPARTMENT OF LAW & PUBLIC SAFETY DIVISION OF CONSUMER AFFAIRS STATE BOARD OF DENTISTRY

IN THE MATTER OF THE LICENSE OF:

Administrative Action

VICTOR TERRANOVA, D.M.D. License #22DI00946500

CONSENT ORDER REINSTATING LICENSE WITH RESTRICTIONS

TO PRACTICE DENTISTRY IN THE STATE OF NEW JERSEY

This matter is before the Board on the application of Victor Terranova, D.M.D. ("respondent"), for reinstatement of his license to practice dentistry in this State. Respondent left the State of New Jersey in 1995 to accept an academic appointment and has not practiced in this State since that time. He did not renew his license for the biennial renewal period 1995-1997 or any time thereafter.

Respondent appeared before the Board on July 2, 2008, with Joseph Gorrell, Esq. At that time he discussed his practice since he left New Jersey and his plans for returning to practice. He has advanced training in periodontics, but is not Board certified in periodontology. He addressed the action taken by the Board in 1996 requiring him to cease and desist from performing complicated extractions (partial or complete boney impactions) until he completed 100 hours of continuing education in oral surgery. Respondent testified that he had not completed that continuing education, but that he did not intend to perform those procedures in his practice. Further, respondent discussed a matter under review by the Connecticut Board of Dentistry, in which he asserted he had limited involvement with the patient who had initiated the complaint.

The Board, after full consideration of the record, including respondent's testimony, finds that reinstatement of his license under the conditions imposed by this order is consistent with the public health, safety, and welfare.

THEREFORE, IT IS ON THIS 15^{+1} DAY OF OCTOBER, 2008,

CONSENTED AND ORDERED THAT:

- 1. The license of Victor Terranova, D.M.D., to practice dentistry is reinstated subject to the terms of this order. Violation of any term of this order shall be a basis for discipline.
- Respondent shall hold his license on a probationary basis for a period of one year and shall submit quarterly reports to the Board identifying practice locations and the nature of the treatment he is providing
- 3. Respondent shall not extract any teeth that are partially impacted or that are complete tissue or boney impactions.

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- 4. Within one year of the entry of this order, respondent shall complete a two day refresher course designed for dentists who are sitting for the American Board of Periodontology certification examination. Respondent shall submit proof of completion to Jonathan Eisenmenger, Executive Director, State Board of Dentistry, 124 Halsey Street, P.O. Box 45005, Newark, New Jersey 07101, within 30 days of completion of the course.
- 5. Respondent shall notify the Board of the disposition of the matter under review by the Connecticut Board of Dentistry. The Board reserves the right to take any action it deems appropriate should respondent be subject to disciplinary action in that matter.

NEW JERSEY STATE BOARD OF DENTISTRY

Alexander Hall, D.M.D.

President

I have read and I understand the terms of this order and agree to be bound by it. I consent to the entry of this Order.

Victor Terranova, D.M.D.

Date

I consent to the entry of this order

as to form.

4. Within one year of the entry of this order, respondent shall complete a two day refresher course designed for dentists who are sitting for the American Board of Periodontology certification examination. Respondent shall submit proof of completion to Jonathan Eisenmenger, Executive Director, State Board of Dentistry, 124 Halsey Street, P.O. Box 45005, Newark, New Jersey 07101, within 30 days of completion of the course.

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NEW JERSEY STATE BOARD OF DENTISTRY

By:_	
	Alexander Hall, D.M.D.
	President

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Victor Terranova, D.M.D.

Date

I consent to the entry of this order as to form.

Joseph Gorrell, Esq.

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NEW JERSEY STATE BOARD OF DENTISTRY

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President

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Victor Terranova, D.M.D.

Date

I consent to the entry of this order

as to form.